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**APPLICANTS**  
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**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a 371 of PCT/IE04/00106 08/06/2004

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
 IRELAND S2003/0579 08/06/2003

**\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*** \* SMALL ENTITY \*  
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Foreign Priority claimed 35 USC 119(a-d) conditions met Verified and Acknowledged	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No /RENEE A. DANEGA/ Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	STATE OR COUNTRY IRELAND	SHEETS DRAWINGS 3	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
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**TITLE**  
 Guide wire for use in a surgical procedure

<b>FILING FEE RECEIVED</b> 515	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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